

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A97000000964**

1. Entity Name

JUMP START INDUSTRIAL PARTNERSHIP, LTD.

Principal Place of Business

~~1321 N. LAKESHORE DRIVE~~
~~SARASOTA FL 34231~~

Mailing Address

~~1321 N. LAKESHORE DRIVE~~
~~SARASOTA FL 34231-3439~~

NEW ADDRESS

2. Principal

SSS

Suite, Apt.

6312 US HWY 301 N. PMB #396

etc.

City & State

ELLENTON, FLORIDA 34222

Zip

Country

Zip

Country

4. FEI Number

65-0768687

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DESENBERG, MILFORD M JR.
1321 N. LAKESHORE DRIVE
SARASOTA FL 34231

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions

as Shown on record.

\$400,000.00

10. Amount of Capital Contributions

in FLORIDA to date.

11. MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT # **P97000038508**
NAME **JUMP START INDUSTRIAL, INC.**
STREET ADDRESS **1321 N. LAKESHORE DRIVE**
CITY - ST - ZIP **SARASOTA FL 34231**

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY - ST - ZIP

600003260126--6

-05/22/00--01004--017

******535.00 ****535.00**

DOCUMENT #
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CITY - ST - ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

Signature of General Partner **941-755-3000**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date **2/25/00** Daytime Phone #

CR2E003 (9/99)